

REMARKS

Claims 1-6, 9-37, 39-47, and 49-52 are pending. Claims 7, 8, 38, and 48 are currently canceled. Claims 1, 17, 34, and 42 are currently amended. Reconsideration of the application is requested.

Rejections Under 35 USC § 103(a)

Claims 1, 3-9, 16-25, 33 - 39, 41-48, and 52 are rejected under 35 USC §103(a) as being unpatentable over Mouchawar et al (US 6,345,200) in view of Hartlaub et al. (6,450,172).

The method of claim 1 as now claimed includes the step of automatically computing a suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information via the medical device programmer.

The device of claim 17 as now claimed includes a medical device programmer that accesses patient medical information of the clinical information system and interrogates the medical device to obtain operational information and sensed physiological parameters from the medical device and automatically computes a suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information and provides an interface by which a programming operator interacts with the medical device programmer to select a the suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information.

The programming device as now claimed in claim 34 includes a parameter computing unit that automatically computes a suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information via the medical device programmer.

The computer readable medium as now claimed in claim 42 includes instructions to cause a processor to automatically compute a suggested

programming parameter value based on the patient medical information, the operational information, and the sensed physiological information.

Mouchawar et al. discloses a method for determining the defibrillation threshold (DFT) for a patient and to determine an optimal implantation configuration for an implantable cardioverter fibrillator (ICD). The disclosed method uses a programmer to correlate patient specific information with a predictive database that contains DFT information for a patient population. The disclosed programmer applies the patient information to the stored patient population data and determines the expected DFT for the patient and the optimal implantation configuration for the ICD.

Hartlaub et al. discloses methods and apparatus for communication of IMD information including interrogation of programmed parameter values, operating modes and conditions of operation, interrogation of data stored in the IMD, and patient warnings by RF transmissions of audible sounds.

Mouchawar et al. only discloses automatically suggesting a programming parameter based on patient data and clinical data. Hartlaub et al. is silent with regard to the concept automatically computing a suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information via the medical device programmer.

Thus, the combination of the disclosures of Mouchawar et al. and Hartlaub et al. do not disclose or suggest the method, device, programmer, and computer readable medium as now claimed in claims 1, 17, 34, and 42. For at least this reason, the above combination of references does not render the inventions as now claimed obvious. Accordingly, Applicants respectfully request that the above rejection be withdrawn.

Claims 10-15, 26-30, 32, 40, 49, 50 and 51 are rejected under 35 USC §103(a) as being unpatentable over Mouchawar et al. in view of Hartlaub et al. and Snell (US 6,249,705).

The combination of Mouchawar et al. in view of Hartlaub et al. was discussed above in relation to independent claims 1, 17, 34, and 42.

Snell discloses a network system for use with implantable medical devices (IMD). The system includes network programmers for programming an IMD and receiving information from the IMD. The system also includes a network server located remotely from the network programmers. The network server is used for data analysis, data storage, and providing software updates to the network programmers. Snell desired to provide a system where the network programmers provided only essential functions directed to device programming, that is, were simple, and inexpensive, and where multiple simple programmers could leverage the network server's processing power to perform more complex operations.

Snell is also silent with regard to the concept automatically computing a suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information via the medical device programmer. Thus, the above combination of references does not disclose or suggest the inventions as now claimed in dependent claims 10-15, 26-30, 32, 40, 49, 50 and 51. For at least this reason, the above combination of references does not render the inventions as now claimed obvious. Accordingly, Applicants respectfully request that the above rejection be withdrawn.

Claim 31 is rejected under 35 USC 103(a) as being unpatentable over Mouchawar et al. in view of Snell in view of Lavin et al. (US 6,450,172) and Hartlaub et al.

Mouchawar et al., Hartlaub et al., and Snell have been discussed in relation to the claims listed above. Lavin et al. was cited for disclosing the element of automatically generating a bill after an office visit. Lavin et al. does not disclose the concept automatically computing a suggested programming parameter value based on the patient medical information, the operational information, and the sensed physiological information via the medical device programmer. Thus, the above combination of references does not disclose or

suggest the inventions as now claimed in dependent claim 31. For at least this reason, the above combination of references does not render the inventions as now claimed obvious. Accordingly, Applicants respectfully request that the above rejection be withdrawn.

In view of the above, it is submitted that the application is in condition for allowance. Examination and reconsideration of the application as amended is requested.

Should any issues remain outstanding, the Examiner is urged to telephone the undersigned to expedite prosecution. The Commissioner is authorized to charge any deficiencies and credit any overpayments to Deposit Account No. 13-2546.

Respectfully submitted,

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